

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventors: Hardjono

Atty Docket: 2204/A55

Serial No: 09/660,370

Date: December 14, 2000

Filed: September 12, 2000

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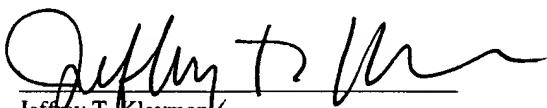
Invention: SYSTEM, DEVICE, AND METHOD FOR CONTROLLING
ACCESS IN A MULTICAST COMMUNICATION NETWORK

MAR 2 2001

Technology Center 2100

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited on December 14, 2000 with the United States Postal Service as first class mail in an envelope addressed to Application Processing Division, Customer Correction Branch, Commissioner for Patents, Washington, DC 20231.


Jeffrey T. Klayman

Application Processing Division
Customer Correction Branch
Commissioner for Patents
Washington, DC 20231

REQUEST FOR CORRECTED FILING RECEIPT

Dear Sir:

Applicant notes a typographical error in the firm name of the Attorney for Applicant, as shown on the attached filing receipt. The correction should be as follows:

"Bromberg & Bromberg" should be --Bromberg & Sunstein LLP--

A copy of the filing receipt with the requested change is enclosed. Applicant kindly requests that the filing receipt be amended accordingly.

Respectfully submitted,


Jeffrey T. Klayman

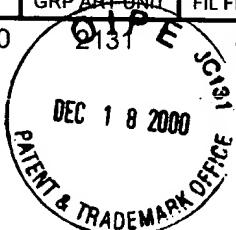
Registration No. 39,250
BROMBERG & SUNSTEIN LLP
125 Summer Street
Boston, MA 02110
(617) 443-9292

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DEC - 1 2000

**UNITED STATES PATENT AND TRADEMARK OFFICE****BROMBERG & SUNSTEIN**
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY.DOCKET.NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/660,370	09/12/2000	2131	4044	2204/A55	9	69	21

 Jeffrey T Klayman
 Bromberg & Bromberg
 125 Summer Street
 Boston, MA 02110
**FILING RECEIPT**

OC00000005578462

DOCKETED**Should be "Sunstein, LLP"**

Date Mailed: 11/27/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Thomas P. Hardjono, Winchester, MA ;

RECEIVED**Continuing Data as Claimed by Applicant**

THIS APPLN CLAIMS BENEFIT OF 60/204,218 05/15/2000

MAR 2 2001

Foreign Applications

Technology Center 2100

If Required, Foreign Filing License Granted 11/04/2000**Title**

System, device, and method for controlling access in a multicast communication network

Preliminary Class

713

Data entry by : WHITE, JACKIE**Team : OIPE****Date: 11/27/2000**

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Bib Data Sheet

SERIAL NUMBER 09/660,370	FILING DATE 09/12/2000 RULE	CLASS 713	GROUP ART UNIT 2131	ATTORNEY DOCKET NO. 2204/A55
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APPLICANTS

Thomas P. Hardjono, Winchester, MA ;

** CONTINUING DATA *****

THIS APPLN CLAIMS BENEFIT OF 60/204,218 05/15/2000

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE

GRANTED ** 11/04/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 9	TOTAL CLAIMS 69	INDEPENDENT CLAIMS 21
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

Jeffrey T Klayman
 Bromberg & Sunstein LLP
 125 Summer Street
 Boston, MA 02110

TITLE

System, device, and method for controlling access in a multicast communication network

FILING FEE RECEIVED 3162	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit